

**LOBBYING - APPLICATION TO OBTAIN LOGON PASSWORD
AND
AUTHORIZATION OF VENDOR OR SERVICE PROVIDER**

I, the undersigned, am on record with the Secretary of State as:

(check one)

- ☐ Lobbyist ☐ Responsible Officer ☐ Responsible Officer of the Lobbying Firm
☐ Attorney ☐ CPA who acts as the agent for the entity or organization listed below.

(print full name of Lobbyist, Lobbying Firm, Lobbyist Employer or Lobbying Coalition) (ID# if known)

(Address) (City) (State) (Zip)

and am entitled to lobbying disclosure reports on behalf of said lobbyist, lobbying firm, lobbyist employer or lobbying coalition. In order to file my required reports electronically, I hereby apply for issuance of an electronic filing password and user identification number.

Furthermore, I intend for my vendor or service provider to submit my reports electronically on my behalf. I hereby authorize

(insert full name of vendor/provider)

to obtain my electronic filing password and identification number in order to timely file my lobbying reports.

Subscribed and sworn on _____
(date)

(signature)

(print name of signer) (phone number) (fax number)

* This form may also be used by persons spending \$5,000 or more to influence legislative or administrative action. Enter the name of the person spending \$5,000 or more in the lobbying name section, and leave the identification number blank. The Secretary of State will assign a number to you to use in filing electronically.

Please be sure to include a fax number where we may direct our response.

PLEASE FAX THIS APPLICATION to (916) 653-5045